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NEWS NOTES

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SECRETARY OF WAR APPOINTS MEDICAL ADVISORY COMMITTEE

Secretary of War Robert P. Patterson recently announced appointment of a medical advisory committee to the Secretary of War, to maintain and foster close relations between civilian and Army medicine, and to enable the Army to receive advice on Army medical organization and policies from leaders in civilian medicine.

Members of the new committee are: Dr. Edward D. Churchill of Boston, Chairman; Dr. Elliott Cutler, Moseley Professor of Surgery at Harvard University; Dr. Michael DeBakey of the Tulane University Medical School; Dr. Eli Ginsberg of Columbia University; Dr. William C. Menninger, Director of the Menninger Clinic, Topeka, Kansas; Dr. Hugh J. Morgan, Professor of Medicine, Vanderbilt University Medical School, and Dr. Maurice C. Pincoffs, Professor of Medicine, University of Maryland.

All members of the committee served with the Medical Department of the Army during the war, either as officers or in a civilian capacity, and are intimately familiar with Army medicine. Dr. Churchill, the chairman, was the Army's consultant in surgery in the Mediterranean Theater. He is Professor of Surgery at Harvard Medical School and President of the American Surgical Association.

During the war, more than 95 per cent of Army doctors were drawn from civilian medicine. Most of these, except recent graduates of the Army Specialized Training Program, have been released from the Army and have returned to their civilian practices.

Major General Norman T. Kirk, Surgeon General of the Army, previously announced a policy under which distinguished civilian doctors will serve as consultants in their respective specialties in Army general hospitals.

MORE



## GENERAL KIRK ADDRESSES AMERICAN PHARMACEUTICAL ASSOCIATION MEETING IN PITTSBURGH

Major General Norman T. Kirk, The Surgeon General, paid tribute to the wartime record of American pharmacists before 1,000 members at the annual meeting of American Pharmaceutical Association in Pittsburgh August 27.

"The American drug industry performed virtual miracles of production in the manufacture of atabrine, DDT, penicillin and other drugs vital to the health of the nation's soldiers," General Kirk said.

He went on to relate that the American soldier was the healthiest in the world. He attributed that record, in part, to the high quality and ready availability of pharmaceutical products such as drugs and biologicals which are so vital in the successful treatment of patients.

He explained the bill now pending in Congress which will create a Medical Service Corps. It is known as HR 7167 and S 2474. Under provision of the proposed bill, the Pharmacy Corps, Medical Administrative Corps and Sanitary Corps will be abolished in name and known only as MSC.

Even though Pharmacy Corps as such will no longer exist when the bill is passed, the identity of officers specializing in the different technical services will be maintained, General Kirk pointed out. A ranking officer in Pharmacy will be assigned to the Office of The Surgeon General to advise on all matters peculiar to pharmacists.

Among the positions Medical Service Corps officers will be eligible to hold are: Assistant battalion surgeons, commanding officers of ambulance companies and various administrative positions in the Medical Battalion; Adjutants, registrars and executive officers of Field, Evacuation, Station and General Hospitals; medical supply officers in the Office of The Surgeon General, supply depots and hospitals of all categories; Instructors at Brooke Army Medical Center, Fort Sam Houston, Texas, and will assist in the Medical Department research program at Army Medical School, Army Medical Center, Washington, D. C.

When the Army Institute of Pathology is moved to Forest Glen, Md., MSC officers will be assigned there. Planning money is already available for moving the Institute from Washington to Forest Glen where it will become an integral part of the proposed Army Medical Research & Graduate Training Center.

## ARMY HOSPITAL COMMANDERS MEET ON POSTWAR PROBLEMS

Twenty-three commanders of Army hospitals met in the offices of Army Surgeon General Norman T. Kirk on August 22 and 23 to discuss various problems incident to the postwar organization and program of the Army Medical Department.

A reception and dinner was held in the Officers' Club, Army Medical Center, Washington. The two-day conference ended with a stag buffet dinner in the quarters of General Kirk.



## ARMY HOSPITAL COMMANDERS MEET ON POSTWAR PROBLEMS (Continued)

At the conference were Brigadier General Omar H. Quade, USA, Fitzsimons General Hospital, Denver, Colorado; Brigadier General Charles C. Hillman, USA, Letterman General Hospital, San Francisco, California; Brigadier General George C. Beach, USA, Walter Reed General Hospital, Washington, D. C.; Colonel Alfred E. Upshur, Army & Navy General Hospital, Hot Springs, Arkansas; Colonel George W. Reyer, Beaumont General Hospital, El Paso, Texas; Colonel Carl R. Mitchell, McCormack General Hospital, Pasadena, California; Colonel Robert M. Hardaway, Bushnell General Hospital, Brigham City, Utah; Colonel Floyd V. Kilgore, Cushing General Hospital, Framingham, Massachusetts; Colonel Oramel J. Stanley, Halloran General Hospital, Willowbrook, L. I. New York; Colonel Cleve C. Odom, Mason General Hospital, Brentwood, L. I. New York; Colonel Hew B. McMurdo, Oliver General Hospital, Augusta, Georgia; Colonel Charles A. Pfeffer, Old Farms Convalescent Hospital, Avon, Connecticut; Colonel John R. Hall, Bruns General Hospital, Santa Fe, New Mexico; Colonel Harry L. Krafft, Mayo General Hospital, Galesburg, Illinois; Colonel Dean F. Winn, Moore General Hospital, Swannanoa, North Carolina; Colonel C. K. Berle, O'Reilly General Hospital, Springfield, Missouri; Colonel Samuel J. Turnbull, Tilton General Hospital, Fort Dix, New Jersey; Colonel Cleon J. Gentzkow, Valley Forge General Hospital, Phoenixville, Pa; Colonel Paul H. Streit, Brooke General Hospital, Fort Sam Houston, Texas; Colonel Maxwell J. Keeler, Madigan General Hospital, Tacoma, Washington; Colonel Paul Crawford, Wakeman General Hospital, Camp Atterbury, Indiana; Colonel Clyde M. Beck, Pratt General Hospital, Coral Gables, Florida; Colonel Paul A. Keeney, Murphy General Hospital, Waltham, Massachusetts; and Colonel Asa Lehman, Army & Navy General Hospital, Hot Springs, Arkansas.

### GIST OF REMARKS BY

THE HONORABLE ROBERT P. PATTERSON, SECRETARY OF WAR, AT JOINT  
WAR DEPARTMENT-VETERANS ADMINISTRATION PRESS AND RADIO CONFERENCE

Between 17,000 and 18,000 members of the armed forces lost arms or legs in the recent war, about 15,000 of them in the Army. Serious as these figures are in terms of suffering and life-time handicaps, the total number is not large in comparison to the amputations steadily occurring in civilian life. Estimates place these at roughly 30,000 per year. There are several hundred thousand amputees in the country's population. Many of these were industrial casualties that were incurred in war industry.

Little progress through the years had been made in artificial limbs. The Army and the Veterans Administration have provided, regardless of cost, the best limbs which industry had developed, but beyond this it was felt that the United States owed a further obligation to these men who had made such a heavy sacrifice in fighting for their country. To this end The Surgeon General of the Army early in 1945 asked the National Defense Research Council to set up a special committee for this purpose. The War Department later added to this effort by initiating a program of research in Army hospitals which has since been continuing and is now centered at Walter Reed Hospital.



REMARKS BY THE HONORABLE ROBERT P. PATTERSON, SECRETARY OF WAR (Cont'd)

Meanwhile the committee's activities were broadened and additional funds were made available. Last fall the program was taken over and paid for by the Army. Later General Bradley and I arranged that the Army and the Veterans Administration would jointly finance and sponsor it.

Through this committee of scientists, engineers and orthopedic surgeons, a comprehensive plan of research in all phases of the problems as to artificial limbs was laid out. Contracts were placed with various universities and industrial corporations to undertake research and development. Like most research the results of such efforts do not become evident for some time, but momentum is gradually gathered. This has been the case in research in artificial limbs. We are now in the midst of this work. It will need to continue for many months at least and probably for several years. Ample funds have been made available now and planned for the future so that it will lack neither money nor continuity. In the current fiscal year \$1,300,000 has already been placed at the disposal of the committee, of which the War Department and the Veterans Administration have each provided half. More will be supplied if necessary. Most of the committee's work is still in the research stage but it already gives promise of significant future aid for all types of amputees.

In one phase of the work, however, we have now reached a point at which the products are ready for more extended use. This is in the field of artificial arms. Here we have passed from the research and development stage to one of field or service testing on a large scale. We have an arm which is certainly an improvement over previous devices and one which has enabled a number of men of the most severely handicapped group, those who have lost both arms, to live reasonably normal lives again. But these new arms are definitely not the last word or the final achievement. They merely represent an important step. They are, however, the first concrete result for practical application in this great program of research. And it is because this work has now yielded this first definite practical result that, knowing of the great public interest in the cases of these war-handicapped men, General Bradley and I felt that this progress deserved to be brought to your attention.

One of the contractors under the committee has been the Northrop Aircraft Corporation of California. Mr. Northrop started this work because of his own patriotic interest in the subject before the committee was organized, and he continued it later under grants from the committee. He has had a number of the most severely handicapped arm amputees who have worked with his organization for many months in testing various stages in the development of better arms. Several of these men have come here from California at my invitation. One lost his right arm; the others lost both arms at varying levels. Of these double amputees three are veterans of this war and one of the first world war.



## COLONEL DUFRENNE WINS BRITISH DECORATION

Col. Martin F. Dufrenne of Fort Myer has been awarded the Order of the British Empire for service to the British army staff during World War II. Col. Dufrenne is post surgeon at Fort Myer. During the war he served as surgeon for the Military District of Washington, including the British and Canadian army staffs.

## INTERDEPARTMENTAL COMMITTEE FOR THE COORDINATION MEDICAL TRAINING FILM PRODUCTION

The War and Navy Departments, U. S. Public Health Service, and Veterans Administration realizing the proved value of films and film strips in the training of those who are interested in the field of medicine have by cooperative effort established an Interdepartmental Committee for the Coordination of Medical Training Film Production.

It is the purpose of this committee to develop production facilities and programs in an orderly and balanced manner and to eliminate in so far as is possible unnecessary duplication of effort. To accomplish its purpose, the committee at regular meetings discusses and decides upon: essential aspects of films or other training aids in production; films or other training aids urgently needed; and the agency which possesses facilities essential to the production of a new project.

All visual aids planned and produced are being classified under a limited number of headings, each representing a general field of knowledge pertinent to medicine. Certain agencies possess facilities and subject material suitable for each field of knowledge referred to, hence the appropriate agency is designated in each instance to produce the aid required. Any agency which contemplates departure from this general plan brings the matter to the attention of the committee and an appropriate solution to the problem is agreed upon by all members.

It is further, the desire of all concerned to make available in the future for loan to medical schools, medical groups, individual physicians, and those engaged in activities considered a part of medical service, who are bound by professional ethics, motion pictures and other visual aids in so far as it is possible within the legal limits imposed upon each visual aid produced.

The committee is composed of the following agency representatives:

Medical Department, U. S. Army - Edward M. Gunn, M.D., chairman; Miss Ruth U. Baker, Recorder

Bureau of Medicine and Surgery, U.S. Navy - Captain L. R. Newhouser (MC) USN, Joseph Herzman, M.D., Captain R. V. Schultz (MC), W. C. Lown, USNR, and Mr. N. Walter Evans.

U. S. Public Health Service - Bernard Dryer, Miss Jean Henderson and Mrs. Alberta Altman.

Veterans Administration - E. H. Cushing, M.D., Joe Beattie, and A. Graham Eddy.



## FOUR ARMY MEDICAL OFFICERS RECEIVE LEGION OF MERIT CITATIONS

Four Army Medical Corps officers were cited recently for outstanding service and awarded the Legion of Merit medal by Major General Norman T. Kirk, The Surgeon General.

Three of the medals were pinned on the officers by General Kirk at a special ceremony in his office. Citations were read by Colonel Howard W. Doan, Executive Officer, SGO.

General Kirk later presented the fourth at Walter Reed General Hospital to Colonel Ralph V. Flew who, as "senior medical officer of the Chinese Medical Liaison Group from September, 1945, to April, 1946, contributed materially to the reorganization of the Chinese Army Medical Service." Colonel Flew, presently assigned to Brooke Army Medical Center, Fort Sam Houston, Texas, is taking advanced study at Walter Reed.

Awards went to the following:

Brigadier General Raymond W. Bliss, Deputy Surgeon General, who "distinguished himself as Surgeon, Eastern Defense Command and First Army from June, 1942, to June, 1943. He organized and supervised the Army Medical installations, services and personnel of the widely dispersed elements, both continental and at overseas bases, of this command. General Bliss' home is at 4338 Reno Road, NW, Washington, D. C.

Dr. James N. Greear, Jr., of 3532 Edmund Street, NW, Washington, D. C., who, as a Lieutenant Colonel "rendered distinguished service as Chief of the Eye, Ear, Nose and Throat Service, Valley Forge General Hospital, Phoenixville, Pennsylvania, from October, 1943, to February, 1945. Through his outstanding background, tact and professional ability, Colonel Greear contributed greatly to facilitating the high standard of care rendered blind patients. ....".

Colonel Roger G. Prentiss, Jr., Deputy Chairman of Army Medical Research & Development Board, Office of The Surgeon General, who "performed exceptionally meritorious and outstanding services as Director of the Research & Development Division and subsequently as Chairman of the Army Medical Research and Development Board in the Office of The Surgeon General from December, 1941, to April, 1946. His executive ability and sound judgment.....have been of great value to The Surgeon General".

## RECALL QUOTA AUTHORIZED FOR 200 MORE MAC'S

The War Department has authorized the recall of 200 more Medical Administrative Officers to active duty. Added to quotas previously announced, this makes a total of 500 MAC officers who will return to an active duty status.

All officers may return to duty for 12, 18 or 24 months or for an unlimited length of time. They must qualify for general duty and be available for overseas assignment.



#### ARRIVALS, OFFICE OF THE SURGEON GENERAL

COLONEL HENRY W. DAINE, MC, of Winona, Minn., formerly of 112th Evacuation Hospital, APO 227, New York City, N.Y., assigned to Office of Personnel, Overhead.

COLONEL JOHN R. OSWALT, MC, of San Francisco, Calif., formerly of Veterans Administrative Facility, Los Angeles, Calif., assigned to Physical Standards Division, Disposition & Retirements Branch.

COLONEL FLOYD L. WERGELAND, MC, of Great Falls, Montana, formerly of Medical Depot Replacement Pool Brooke Army Medical Center, Fort Sam Houston, Texas, assigned to Office of Plans & Operations, Education & Training Division.

LIEUTENANT COLONEL JAMES R. GARNER, DC, of Lebanon, Indiana, formerly of 317th Station Hospital, Continental Base Section, APO 633, United States Army, assigned to Dental Consultants Division, Dental Standards Branch.

LIEUTENANT COLONEL HAROLD W. GLASCOCK, MC, of Raleigh, N. C., formerly of Medical Depot Replacement Pool, Brook Army Medical Center, Fort Sam Houston, Texas, assigned to Office of Plans & Operations, Education & Training Division, Officers Training Branch.

LIEUTENANT COLONEL LEONARD F. WILSON, MC, of Fort Worth, Texas, formerly of 250 Station Hospital, APO 225, assigned to Office of Personnel, Overhead.

MAJOR JOHN M. GRACIE II, PC, of Little Rock, Arkansas, formerly of Medical Depot Replacement Pool, Brooke Army Medical Center, Fort Sam Houston, Texas, assigned to Office of Personnel, Overhead.

MAJOR ALLAN PALMER, MC, of San Francisco, Calif., formerly of Army Medical Center, Washington, D. C., assigned to Historical Division, Editorial Branch.

CAPTAIN CHRISTIAN J. LAMBERTSEN, MC, of Philadelphia, Pa., formerly of Hdq. United States Coast Guard, Washington, D. C., assigned to Office of Personnel, Overhead.

CAPTAIN JOHN W. H. REHN, SnC, of Kensington, Md., formerly of Medical Depot Replacement Pool, Tilton General Hospital, Fort Dix, N.J., assigned to Historical Division, Overhead Branch.

1st LIEUTENANT RODERICK K. MORT, MAC, of Niagara Falls, N.Y., formerly of Brooke Army Medical Center, Fort Sam Houston, Texas, assigned to Office of Personnel, Military Personnel Division, Assignments Branch.

#### DEPARTURES, OFFICE OF THE SURGEON GENERAL

COLONEL WILLIAM A. BOYLE, MC, of Calpella, Calif., formerly of Physical Standards Division, Disposition & Retirements Branch, assigned to European Theater.

COLONEL WESLEY C. COX, MC, of San Antonio, Texas, formerly of Office of Personnel, Overhead, assigned to MDRP Brooke Army Medical Center, Fort Sam Houston, Texas.

COLONEL HENRY W. DAINE, MC, of Winona, Minn., formerly of Office of Personnel, Overhead, assigned to MDRP Brooke Army Medical Center, For Sam Houston, Texas, with station at Fitzsimons General Hospital, Denver, Colorado.

COLONEL FRANCIS M. FITTS, MC, of Washington, D. C., formerly of Office of Personnel, Overhead, assigned to Headquarters, United States Forces European Theater.



## DEPARTURES, OFFICE OF THE SURGEON GENERAL (Continued)

LT. COLONEL EUGENE G. COOPER, PC, Roanoke, Va., formerly of Office of Supply, Storage & Maintenance Division, assigned to Camp Kilmer, N.J., enroute to New York Port of Embarkation.

LT. COLONEL JAMES R. GARNER, DC, of Lebanon, Ind., formerly of Dental Consultants Division, Dental Standards Branch, assigned to MDRP Brooke Army Medical Center, Fort Sam Houston, Texas.

LT. COLONEL GEORGE D. NEWTON, MC, of New York, N.Y., formerly of Office of Personnel, Overhead, assigned to Headquarters 2nd Army, Baltimore, Md.

LT. COLONEL JAMES P. PAPPAS, MC, of Waltham, Mass., formerly of Office of Personnel, Overhead, assigned to Murphy General Hospital, Waltham, Mass.

LT. COLONEL LARRY A. SMITH, MC, of Noonan, N.D., formerly of Office of Personnel, Military Personnel Division, assigned to Headquarters AAF, Office of the Air Surgeon.

LT. COLONEL LEONARD F. WILSON, MC, of Ft. Worth, Texas, formerly of Office of Personnel, Overhead, assigned to Brooke Army Medical Center, Fort Sam Houston, Texas.

LT. COLONEL THOMAS R. WRIGHT, MC, Temple, Texas, formerly of Physical Standards Division, Disposition & Retirements Branch, assigned to MDRP Brooke Army Medical Center, Fort Sam Houston, Texas.

MAJOR LEWIS A. SMITH, MC, St. Joseph, Mich., formerly of Office of Personnel, Overhead, assigned to Headquarters 1st Army Armed Forces Induction Station, New York, N.Y.

CAPTAIN CHRISTIAN J. LAMBERTSEN, MC, of Philadelphia, Pa., formerly of Office of Personnel, Overhead, assigned to Separation Center, Fort Dix, N.J.

CAPTAIN RICHARD E. YATES, MAC, of Conway, Ark., formerly of Historical Division, Historical Research and Manuscripts Branch, assigned to Separation Center, Fort Sam Houston, Texas.

1ST LIEUTENANT DONALD R. FOX, MAC, of Grand Rapids, Mich., formerly of Office of Plans & Operations, Education & Training Division, assigned to Separation Center, Fort Sheridan, Illinois.

1ST LIEUTENANT JOHN B. JOHNSON, JR., MAC, of Parkville, Mo., formerly of Historical Division, Historical Research and Manuscripts Branch, assigned to Separation Center, Fort George G. Meade, Md.

## REASSIGNMENTS, OFFICE OF THE SURGEON GENERAL

LT. COLONEL ARTHUR P. LONG, MC, of Silver Spring, Md., designated as Chief, Infectious Disease Control Branch, Preventive Medicine Division.

## PROMOTIONS, OFFICE OF THE SURGEON GENERAL

### 2ND LIEUTENANT TO 1ST LIEUTENANT

DONALD R. FOX, MAC, of Grand Rapids, Mich., of Office of Plans & Operations, Education & Training Division.